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	States Bankr thern District o						Voluntar	y Petition
Name of Debtor (if individual, enter Last, First, Smith, Simone	Middle):		Name	of Joint De	ebtor (Spouse	e) (Last, First,	Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				her Names de married,	used by the J maiden, and	Joint Debtor in trade names):	n the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	yer I.D. (ITIN)/Comp	lete EIN	Last for	our digits of than one, state	f Soc. Sec. or	r Individual-T	axpayer I.D. (ITIN)	No./Complete EIN
xxx-xx-6200 Street Address of Debtor (No. and Street, City, a 17206 Walter St Apt. B Lansing, IL	nd State):	ZIP Code	Street	Address of	Joint Debtor	(No. and Stre	eet, City, and State):	ZIP Code
	6	0438	1					Zii code
County of Residence or of the Principal Place of Cook	Business:		Count	y of Reside	nce or of the	Principal Pla	ce of Business:	
Mailing Address of Debtor (if different from stre	eet address):		Mailin	g Address	of Joint Debt	tor (if differen	t from street address	s):
		ZIP Code						ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):			_					
Type of Debtor		f Business					tcy Code Under Wi	hich
(Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors	☐ Health Care Bus ☐ Single Asset Rea in 11 U.S.C. § 10 ☐ Railroad ☐ Stockbroker ☐ Commodity Brol ☐ Clearing Bank ☐ Other	al Estate as de 01 (51B)	efined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Ch of a ☐ Ch of a	apter 15 Petition for a Foreign Main Proc apter 15 Petition for a Foreign Nonmain	eeeding Recognition
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:		he United State	es s	defined		onsumer debts,	bus for	ots are primarily iness debts.
Filing Fee (Check one box)	Check one		•	-	ter 11 Debto		
■ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to attach signed application for the court's consideration debtor is unable to pay fee except in installments. Form 3A. □ Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration)	on certifying that the Rule 1006(b). See Officia 7 individuals only). Mus	Check all t A Check all Check all Check all A Check al	otor is not otor's aggri less than S applicable lan is bein	a small busing regate nonco \$2,490,925 (constant) to boxes: ng filed with of the plan w	ness debtor as on ntingent liquida amount subject this petition.	ated debts (excl	one or more classes of	ree years thereafter).
Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt proper there will be no funds available for distribution	erty is excluded and a	dministrative		es paid,		THIS	SPACE IS FOR COUR	T USE ONLY
1- 50- 100- 200-	1,000- 5,001-] 5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$550,000 \$100,000 \$500,000 to \$1 t	\$1,000,001 \$10,000,001 to \$10 to \$50	to \$100 to] 00,000,001 \$500 illion	\$500,000,001 to \$1 billion				
\$0 to \$50,001 to \$100,001 to \$500,001 \$550,000 \$100,000 \$500,000 to \$1 t	\$1,000,001 \$10,000,001 to \$10 to \$50	to \$100 to		\$500,000,001 to \$1 billion				

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B1 (Official For	m 1)(04/13)	Page 2 01 51	Page 2	
Voluntar	y Petition	Name of Debtor(s): Smith, Simone		
(This page mu	st be completed and filed in every case)	Similar, Simone		
1 0	All Prior Bankruptcy Cases Filed Within Last	t 8 Years (If more than two, attach ac	dditional sheet)	
Location Where Filed:	- None -	Case Number:	Date Filed:	
Location Where Filed:		Case Number:	Date Filed:	
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more tha	n one, attach additional sheet)	
Name of Debt - None -	or:	Case Number:	Date Filed:	
District:		Relationship:	Judge:	
	Exhibit A		xhibit B	
forms 10K a pursuant to S and is reques	eleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 string relief under chapter 11.) A is attached and made a part of this petition.	(To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).		
L'AIIIOIC	A is attached and made a part of this pention.	X /s/ Marcie Venturini Signature of Attorney for Debtor(s Marcie Venturini 6203500	November 16, 2015 (Date)	
	Exh	l iibit C		
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	e harm to public health or safety?	
	Exh	nibit D		
_	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made nt petition:	•	a separate Exhibit D.)	
☐ Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition.		
	Information Regarding	•		
_	(Check any ag	-	4- in this District for 100	
•	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for			
	There is a bankruptcy case concerning debtor's affiliate, go	eneral partner, or partnership pending	in this District.	
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defenda	ant in an action or	
	Certification by a Debtor Who Reside (Check all app		rty	
	Landlord has a judgment against the debtor for possession		, complete the following.)	
	(Name of landlord that obtained judgment)			
	(came of amount and octained jacginenty			
	(Address of landlord)	<u> </u>		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment			
	Debtor has included with this petition the deposit with the after the filing of the petition.		•	
	Debtor certifies that he/she has served the Landlord with the	his certification. (11 U.S.C. § 362(I)).		

B1 (Official Form 1)(04/13)

Voluntary Petition	n
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(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Simone Smith

Signature of Debtor Simone Smith

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 16, 2015

Date

Signature of Attorney*

X /s/ Marcie Venturini

Signature of Attorney for Debtor(s)

Marcie Venturini 6203500

Printed Name of Attorney for Debtor(s)

THE SEMRAD LAW FIRM, LLC

Firm Name

20 S. Clark Street

28th Floor

Chicago, IL 60603

Address

Email: rsemrad@semradlaw.com

(312) 913 0625 Fax: (312) 913 0631

Telephone Number

November 16, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s): Smith, Simone

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.		Page	2	
□ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or medeficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.); □ Active military duty in a military combat zone. □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.				
I certify under penalty of perjury	that the info	ormation provided above is true and correct.		
Signature of I	Deotor.	/ Simone Smith		
Date: Nover	mber 16, 2015	mone Smith		

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith		Case No.		
		Debtor			
			Chapter	7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	12,185.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		9,343.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		152,114.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			2,892.03
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,890.00
Total Number of Sheets of ALL Schedu	ıles	25			
	T	otal Assets	12,185.00		
			Total Liabilities	161,457.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith		Case No.	
_		Debtor		
			Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	135,331.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	135,331.00

State the following:

Average Income (from Schedule I, Line 12)	2,892.03
Average Expenses (from Schedule J, Line 22)	2,890.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,819.58

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		1,218.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		152,114.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		153,332.00

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B6A (Official Form 6A) (12/07)

In re	Simone Smith	Case No.
-		Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Simone Smith	Case No.
-		, Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Χ			
2.	Checking, savings or other financial	Che	ecking account with US Bank	-	100.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Sav	ings account with US Bank	-	10.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Furi	niture	-	400.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	use	d clothing	-	350.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10	Annuities. Itemize and name each issuer.	X			
				Sub-Tota	al > 860.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	Simone Smith	Case No
_		· · · · · · · · · · · · · · · · · · ·

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
2.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
3.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	Х			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	2015 Anti	icipated tax refund	-	3,200.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(T	Sub-Tota Sotal of this page)	al > 3,200.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Simone Smith	Case No	_

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	Х			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20	008 Saturn Vue with 119,000 miles // RETAIN	-	8,125.00
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	Χ			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	Χ			
30.	Inventory.	Χ			
31.	Animals.	Χ			
32.	Crops - growing or harvested. Give particulars.	Χ			
33.	Farming equipment and implements.	Χ			
34.	Farm supplies, chemicals, and feed.	Χ			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > 8,125.00 (Total of this page) | Total > 12,185.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Simone Smith	Case No.
-		Debtor ,

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafted
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Ce Checking account with US Bank	rtificates of Deposit 735 ILCS 5/12-1001(b)	100.00	100.00
Savings account with US Bank	735 ILCS 5/12-1001(b)	10.00	10.00
Household Goods and Furnishings Furniture	735 ILCS 5/12-1001(b)	400.00	400.00
Wearing Apparel used clothing	735 ILCS 5/12-1001(a)	350.00	350.00
Other Liquidated Debts Owing Debtor Including Tax 2015 Anticipated tax refund	Refund 735 ILCS 5/12-1001(b)	3,200.00	3,200.00

Total: 4,060.00 4,060.00

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B6D (Official Form 6D) (12/07)

In re	Simone Smith	Case	No
_		Debtor,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME			C Husband, Wife, Joint, or Community				AMOUNT OF	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	LIQUI	ΙE	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 50000152262610001			Opened 6/01/13 Last Active 10/16/15	Т	D A T E D			
1st Investers 380 Interstate North Parkway Sutie 300 Atlanta, GA 30339		-	AUTOMOBILE PMSI 2008 Saturn Vue with 119,000 miles // RETAIN					
	┸		Value \$ 8,125.00	1			9,343.00	1,218.00
Account No.			Value \$					
Account No.			Value \$					
Account No.			X7.1. (b)					
			Value \$	Sub	tota	1		
continuation sheets attached			(Total of				9,343.00	1,218.00
			(Report on Summary of S		Γota dule		9,343.00	1,218.00

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B6E (Official Form 6E) (4/13)

•				
In re	Simone Smith		Case No	
-		Debto	, r	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report thi total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. $11 \text{ U.S.C.} \ \$ 507(a)(3)$.
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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R6F	Official	Form	6F)	(12/07)

In re	Simone Smith	Case No
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	С	Н	usband, Wife, Joint, or Community		Ç	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	CONSIDERATION FOR CLAIM. IF C	CLAIM	ONTINGENT	Z L Q U L D A	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxx2290			Opened 2/01/15 Last Active 10/16/15		T T	D A T E D		
Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130		-	Credit Card			D		501.00
Account No.			unsecured					
Comcast 1255 W. North Ave Chicago, IL 60622-1562		-						200.00
Account No.			01/2015					
ComEd 3 Lincoln Center Attn: Bankruptcy Section Oakbrook Terrace, IL 60181		-	unsecured					
Account No. xxxxxxx53N1			Opened 10/01/14		-			200.00
Commonwealth Financial Systems 245 Main St Dickson, PA 18519		-	Collection Attorney Mea-Sullivan					290.00
				(Total of t	Sub his			1,191.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No.
		Debtor ,

	1.	1		-	11	_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	0 Z Q D Q	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxx57N1			Opened 10/01/14	Т	ATED		
Commonwealth Financial Systems 245 Main St Dickson, PA 18519		-	Collection Attorney Mea-Sullivan		ם		241.00
Account No. xxx4638	┢		Opened 3/01/11				211.00
Credtrs Coll Po Box 63 Kankakee, IL 60901		-	Collection Attorney Assoc. St. James Radiologists				
							395.00
Account No. xxxxxxxx8938	4		Opened 12/01/12				
Debt Recovery Solution Attention: Bankruptcy 900 Merchants Concourse Ste LI11 Westbury, NY 11590		-	Factoring Company Account Us Cellular				265.00
Account No. xxxxxxxxxxxxxxxxx0902	-		Opened 9/01/08 Last Active 7/31/15				
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational				1.00
Account No. xxxxxxxxxxxxxxxxx0902	t		Opened 9/01/08 Last Active 7/31/15				
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational				1.00
Sheet no1 of _10_ sheets attached to Schedule of	<u></u>	<u> </u>	<u> </u>	ubt	ota	<u>L</u>	, ,
Creditors Holding Unsecured Nonpriority Claims			(Total of th				903.00

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In re	Simone Smith	Case No
-		Debtor

	-	1			_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	CONSIDERATION FOR CLAIM. IF CLAI	_M	N	OM-TAG-TAG	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxx0908			Opened 9/01/10 Last Active 7/31/15		Т	E		
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational			D		1.00
Account No. xxxxxxxxxxxxxxxxx1105		T	Opened 11/01/09 Last Active 7/31/15		1			
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					
								1.00
Account No. xxxxxxxxxxxxxxxxxxxx727			Opened 7/01/09 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					4.00
Account No. xxxxxxxxxxxxxxxxxx1105			Opened 11/01/09 Last Active 7/31/15		_			1.00
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxxx727	-	+	Opened 7/01/09 Last Active 7/31/15	+	\dashv			
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					
								1.00
Sheet no2 of _10_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(То	Su al of thi		otal	- 1	5.00

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In re	Simone Smith	Case No
•		Debtor

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF CI IS SUBJECT TO SETOFF, SO STA	LAIM	00z⊢_zgшz	I QUID		AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxx0307			Opened 3/01/11 Last Active 7/31/15		Т	A T E D		
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational			D		1.00
Account No. xxxxxxxxxxxxxxxxx0711			Opened 7/01/11 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					4.00
Account No. xxxxxxxxxxxxxxxxx0307	_		Opened 3/01/11 Last Active 7/31/15					1.00
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxxx711			Opened 7/01/11 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxxx716	┢		Opened 7/01/12 Last Active 7/31/15				H	
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Sheet no3 of _10_ sheets attached to Schedule of	<u> </u>			S	L uht	tota	L I	
Creditors Holding Unsecured Nonpriority Claims			((Total of th				5.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No
-		Debtor

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	IM	CONFINGEN	UZ LL QULD A		AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxx1102			Opened 11/01/11 Last Active 7/31/15		Т	A T E D		
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational			D		1.00
Account No. xxxxxxxxxxxxxxxx1102			Opened 11/01/11 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					
								1.00
Account No. xxxxxxxxxxxxxxxxxxxxxx313			Opened 3/01/09 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					4.00
Account No. xxxxxxxxxxxxxxxxx0923	_		Opened 9/01/13 Last Active 7/31/15					1.00
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxxx0123			Opened 1/01/14 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					1.00
Shoot no. 4 of 10 shoots attached to Sale-July-S		_		C			Ц	1.00
Sheet no. <u>4</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	otal of th		ota pag		5.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No.
-		Debtor

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE OF ANAWAS INCUIDED AN	AIM	0 N T _			AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxxxx313		T	Opened 3/01/09 Last Active 7/31/15		Ť	A T E D		
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational			D		1.00
Account No. xxxxxxxxxxxxxxxxx0908	\dagger	$\frac{1}{1}$	Opened 9/01/10 Last Active 7/31/15					
Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773		-	Educational					4.00
Account No. xxxx0116	+	-	Opened 3/01/14		_		Н	1.00
ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256		-	Collection Attorney Sprint					591.00
Account No. xxxxx5372	╁	+	Opened 6/01/15				H	
ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256		-	Collection Attorney Tmobile					147.00
Account No. xxxxxxxxxxxx1001	╁	+	Opened 3/01/11 Last Active 7/05/13					147.00
Exeter Finance Corp Po Box 166097 Irving, TX 75016		-	Automobile					1.00
Sheet no. 5 of 10 sheets attached to Schedule o	 f			· ·	lubi	tota		1.00
Creditors Holding Unsecured Nonpriority Claims	L		(7	S Fotal of th				741.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No	
-		Debtor	

	<u> </u>	ш.,	sband, Wife, Joint, or Community	16	Ιυ	Г	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DRLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx0002			Opened 7/01/15 Last Active 10/31/15	Ī	E		
Fed Loan Servicing Po Box 69184 Harrisburg, PA 17106		-	Educational		D		135,304.00
Account No.			01/2015	+			,
Fifth Third Card Center P O Box 740789 Cincinnati, OH 45274		-	unsecured				600.00
Account No. xxxxxxxxxxx7626			Opened 12/08/06 Last Active 1/31/07	+			000.00
Hsbc/tax Hsbc Taxpayer Financial Services 90 Christiana Rd New Castle, DE 19720		-	Unsecured				1.00
Account No. xxxxxxxxxxxx4008			01 Village Of Lynwood	1			
Mcsi Inc Po Box 327 Palos Heights, IL 60463		-					250.00
Account No. xxxxxxxxxxxxx9937			01 City Of Country Club Hills Ss	+	\vdash	\vdash	
Mcsi Inc Po Box 327 Palos Heights, IL 60463		-					200.00
Sheet no. 6_ of 10_ sheets attached to Schedule of		_		Sub			136,355.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	100,000.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No	
-		Debtor	

	1.	1			_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H V C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AI CONSIDERATION FOR CLAIM. IF CI IS SUBJECT TO SETOFF, SO STAT	LAIM	COXF_XGEX	071-Q0-D4F#D		AMOUNT OF CLAIM
Account No.			01/2015		Т	TE		
Monteray Financial Services P.O. Box 2809 Carlsbad, CA 92018		-	unsecured			ט		1,000.00
Account No. xxxxxxxxxxxxxxxxx1105	╁	\vdash	Opened 11/01/09 Last Active 9/01/10					
Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxx1105	╁	┝	Opened 11/01/09 Last Active 9/01/10					
Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxx0727	╁	\vdash	Opened 7/01/09 Last Active 9/01/10					
Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773		-	Educational					1.00
Account No. xxxxxxxxxxxxxxxxx727	+	\vdash	Opened 7/01/09 Last Active 9/01/10			H		
Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773		-	Educational					1.00
Sheet no7 of _10_ sheets attached to Schedule of				S	ubt	ota	L l	
Creditors Holding Unsecured Nonpriority Claims			(Total of th				1,004.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No
-		Debtor

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CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		C	U N	P	
MAILING ADDRESS	CODEBTO	Н	DATE CLAIM WAS INCURRED AN	ND	CONT	Į:Ì		
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W	CONSIDERATION FOR CLAIM. IF CL	AIM	İ	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	O R	c	IS SUBJECT TO SETOFF, SO STAT	E.	NGEN	Ĭ	Ė	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxx313	Ë		Opened 3/01/09 Last Active 9/01/09		N T	LIQUIDATED		
	l					D		
Navient			Educational					
Attn: Claims Dept		-					H	
Po Box 9500							H	
Wilkes-Barr, PA 18773							H	
								1.00
Account No. xxxxxxxxxxxxxxxxx0902			Opened 9/01/08 Last Active 9/01/09					
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Attn: Claims Dept		_	Ladoutonal				H	
Po Box 9500							H	
Wilkes-Barr, PA 18773							H	
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Account No. xxxxxxxxxxxxxxxx0313			Opened 3/01/09 Last Active 9/01/09				Н	
Navient			Educational				H	
Attn: Claims Dept		-					H	
Po Box 9500							H	
Wilkes-Barr, PA 18773								1.00
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Account No. xxxxxxxxxxxxxxxxx0902	ŀ		Opened 9/01/08 Last Active 9/01/09					
Navient			Educational					
Attn: Claims Dept		-					H	
Po Box 9500							H	
Wilkes-Barr, PA 18773							H	
								1.00
Account No.	T		01/2015				П	
Nicor	ĺ		unsecured					
P.O. Box 2020	ĺ	-						
Aurora, IL 60507								
								1,000.00
					<u> </u>		Ц	1,000.00
Sheet no. <u>8</u> of <u>10</u> sheets attached to Schedule of			_			tota	- 1	1,004.00
Creditors Holding Unsecured Nonpriority Claims				Total of th	11S	pag	e)	, -

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No
_		Debtor

CDEDITORIO NA ME	С	Н	usband, Wife, Joint, or Community		СО	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	,	ZH _ ZG L	Z Q Q		AMOUNT OF CLAIM
Account No.			unsecured		Ť	ATED		
Omega Healthcare Tech School 3575 Grand Ave # D Gurnee, IL 60031		-				D		3,000.00
Account No.	+	+	11/2015					-,,,,,,,,,
Partnership Concepts Realty Managem 201 East Ogden Hinsdale, IL 60521		-	Judgement 45D08-1511-SC-05670					
	┸							1,500.00
Account No. PLS 1006B 162nd Street South Holland, IL 60473		-	01/2012 unsecured					2,000.00
Account No.	+	t	01/2013					
State of IL Dept of Human Ser 100 S. Grand Ave. East Springfield, IL 62762		-	repayment of TANF					4,000.00
Account No.	╁	t	01/2015					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TCF 500 Joliet Rd Willowbrook, IL 60527		-	unsecured					400.00
Sheet no. 9 of 10 sheets attached to Schedule of	f		<u> </u>	Sı	ıbt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Tota	of th	is p	pag	e)	10,900.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Simone Smith	Case No
-		, Debtor

	١.	1	L LWC Live O	_	1	<u> </u>		
CREDITOR'S NAME,	CODEBTOR	1	sband, Wife, Joint, or Community	C O N T I	N	DISPUT	1	
MAILING ADDRESS INCLUDING ZIP CODE,	E	Н	DATE CLAIM WAS INCURRED AND	N T	ŀ	S P		
AND ACCOUNT NUMBER	В	W J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	Į Ų	١.	AMOUNT OF CLAIM
(See instructions above.)	Ö	c	IS SUBJECT TO SETOFF, SO STATE.	Ğ	Ĭ	Ė		ANNOCIVI OI CLANIVI
	K	┖		NG E NT	A	٦	`∟	
Account No. xxxxxxxx7236			Opened 11/01/07 Last Active 3/12/11	1'	A T E D			
	1			\perp	D	╙	4	
Wells Fargo Dealer Services			Automobile		1			
Po Box 3569		-						
Rancho Cucamonga, CA 91729								
					1			1.00
				丄	┖			1.00
Account No.								
	1				1			
					1			
					1			
					1			
Account No.				T	T			
	1							
					1			
					1			
Account No.	t	T		+	T	t	\top	
Account No.	ł				1			
					1			
					1			
Account No.	t	H		+	t	t	+	
Tiecount 110.	ł	1						
					1			
Cheet no. 10 of 10 shoots attached to College of			<u> </u>	Sub	tot:	.1	+	
Sheet no. 10 of 10 sheets attached to Schedule of								1.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	L	
				,	Γota	al		
			(Report on Summary of S					152,114.00
			(Report on Summary of S	LIIC	uui	03)	Ш	,

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B6G (Official Form 6G) (12/07)

In re	Simone Smith	Case No.
_		,
		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.

State whether lease is for nonresidential real property.

State contract number of any government contract.

Richard Jones 17206 Walter St Lansing, IL 60438 month to month residential lease

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B6H (Official Form 6H) (12/07)

In re	Simone Smith	Case No.
_		,
		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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E	in this information to identify your c								
	otor 1 Simone Smit								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number 					Check if this is An amende A supplementation	ed filing ent showir	ng post-petitio	
O ¹	fficial Form B 6I					MM / DD/ \		ollowing date.	
	chedule I: Your Inc	ome				י עם לי וויוויוי			12/13
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your th you, do not inclu	spouse i ude infori	is livin mation	g with you, inc about your sp	lude infor ouse. If m	mation abou nore space is	t your needed,
1.	Fill in your employment								
١.	information.		Debtor 1			Debtor 2	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status*	■ Employed□ Not employed				☐ Employed ☐ Not employed		
	employers.	Occupation	Nurse						
	Include part-time, seasonal, or self-employed work.	Employer's name	Medix Staffing S	olutions,	Inc.				
	Occupation may include student or homemaker, if it applies.	Employer's address	477 E Butterfield Suite 400 Lombard, IL 601						
Par	t 2: Give Details About Mo	How long employed th			for Ad	ditional Emplo	yment Info	ormation	
Esti spou	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have m	ate you file this form. If y	,	·	•		·	•	· ·
	e space, attach a separate sheet to		mbine the mormatic	on for all e	employ	ers for that pers	on on the	illes below. II	you need
					F	or Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	3,670.33	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li		4.	\$	3,670.33	\$	N/A_		

Official Form B 6I Schedule I: Your Income page 1

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Debt	tor 1	Simone Smith	-	С	Case number (if kr	own)				
					For Debtor 1		non	Debtor 2	pouse	
	Сор	y line 4 here	4.		\$3,670).33_	\$_		N/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			3.30	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$_		N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		·	0.00	\$_ \$		N/A N/A	_
	5f.	Domestic support obligations	5f.		·	0.00	\$_		N/A	_
	5g.	Union dues	5g.		·	0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_ 5h.			0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$923	3.30	\$		N/A	<u>-</u>
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$2,747	7.03	\$		N/A	<u>-</u>
9.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Total Nurse Network all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8c. 8d. 8e.		\$ (0 \$ (0 \$ (0 \$ (0 \$ (0 \$ (0 \$ (145)	0.00 0.00 0.00 0.00 0.00 0.00	\$\$ \$\$\$ \$\$\$\$ \$\$\$\$		N/A N/A N/A N/A N/A N/A	
Э.	Auu	an other income. Add lines datobrocrourderolrogram.	J.		140	5.00	Ψ_		N//	<u> </u>
10.		•	10.	\$_	2,892.03	+ \$_		N/A	= \$ _	2,892.03
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.	Add Write appl	the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines	sult is ain Lia	the abili	e combined mo ities and Relate	nthly i d <i>Data</i>	ncome a, if it	12.	\$Combi	2,892.03 ned ly income
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?							
		Yes. Explain: Debtor will only be working at Total Nurse Network of \$192.00 in gross income per month.	once	a n	month in whic	h she	will re	ecieve a	an addi	itional

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Debtor 1	Simone Smith	Case number (if known)	
----------	--------------	------------------------	--

Official Form B 6I Attachment for Additional Employment Information

Debtor	
Occupation	nurse
Name of Employer	Total Nurses Network, LLC
How long employed	3 months
Address of Employer	1515 N. Harlem Ave
	Suite 110
	Oak Park, IL 60302

Official Form B 6I Schedule I: Your Income page 3

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Fill i	n this informa	ation to identify y	our case:					
Debt	tor 1	Simone Smit	·h			Che	eck if this is:	
		Official Office	11			П	An amended filing	
Debt	tor 2						•	wing post-petition chapter
(Spo	use, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case	e numbe r						A separate filing fo	or Debtor 2 because Debtor
1	nown)						2 maintains a sepa	
Of	ficial Ec	rm B 6J						
		J: Your	_ Exper	ises				12/13
				. If two married people a	re filing together, bo	oth are eq	ually responsible f	
info	rmation. If m	nore space is ne	eeded, atta	ach another sheet to this				
nun	nber (if know	n). Answer eve	ry questio	n.				
Part	1: Desci	ribe Your House	ehold					
1.	Is this a joir	nt case?						
	■ No. Go to	o line 2.						
	☐ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	□N	lo						
	ΠY	es. Debtor 2 mu	st file a se	parate Schedule J.				
_								
2.	Do you have	e dependents?	■ No					
	Do not list D		☐ Yes.	Fill out this information for	Dependent's relation Debtor 1 or Debtor		Dependent's	Does dependent live with you?
	and Debtor 2			each dependent	Debior 1 or Debior		age	
	Do not state dependents'							☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
0	D							☐ Yes
3.		penses include of people other t	han I	No				
		d your depende		Yes				
Dort	- O. Fotim	ate Your Ongo	ina Manth	ly Eynanaa				
Part				uptcy filing date unless y	ou are using this fo	rm as a s	supplement in a Ch	apter 13 case to report
exp	enses as of a	a date after the						of the form and fill in the
app	licable date.							
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
			nd have inc	cluded it on Schedule I:	Your Income		Your exp	ansas
(Off	icial Form 6I	.)					Tour exp	C113C3
4.	The rental of	or home owners	ship exper	ses for your residence. I	nclude first mortgage)	_	000.00
	payments ar	nd any rent for th	ne ground o	or lot.		4.	\$	800.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner'	s, or renter	's insurance		4b.		0.00
	4c. Home	maintenance, re	epair, and ı	upkeep expenses		4c.		0.00
_		owner's associa				4d.	\$	0.00
5.	Additional r	mortgage paym	ents for vo	our residence , such as ho	me equity loans	5.	S	0.00

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Debtor 1	Simone S	Smith	Case num	ber (if known)	
S. Utili	ities:				
6a.		heat, natural gas	6a.	\$	275.00
6b.		ver, garbage collection	6b.		0.00
6c.		, cell phone, Internet, satellite, and cable services	6c.	·	125.00
6d.	Other. Spe		6d.		0.00
		ekeeping supplies	od. 7.	·	
		hildren's education costs	8.	\$	425.00
_			9.	\$	0.00
	_	ry, and dry cleaning		·	100.00
		roducts and services	10.	·	120.00
		ntal expenses	11.	Φ	55.00
	n sportation. not include ca	Include gas, maintenance, bus or train fare.	12.	\$	350.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		ributions and religious donations	14.	·	100.00
5. Insu		ibutions and rengious donations	17.	Ψ	100.00
		surance deducted from your pay or included in lines 4 or 2	20		
	. Life insura		15a.	\$	0.00
	. Health insu		15b.		0.00
	. Vehicle ins		15c.		123.00
		rance. Specify:	15d.	·	0.00
		clude taxes deducted from your pay or included in lines 4		Ψ	0.00
Spec		side taxes deducted from your pay or moldaed in lines 4	16.	\$	0.00
		ease payments:		·	0.00
		ents for Vehicle 1	17a.	\$	367.00
		ents for Vehicle 2	17b.	\$	0.00
		cify: Repayment to State of Illinois	17c.	\$	50.00
	. Other. Spe		17d.	· -	0.00
		of alimony, maintenance, and support that you did no	t report as		
		our pay on line 5, Schedule I, Your Income (Official F		\$	0.00
9. Oth e	er payments	you make to support others who do not live with you	•	\$	0.00
Spec			19.		
		erty expenses not included in lines 4 or 5 of this form			
20a.	 Mortgages 	on other property	20a.	·	0.00
20b.	. Real estate	e taxes	20b.	\$	0.00
20c.	. Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20d.	. Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20e.	. Homeown	er's association or condominium dues	20e.	\$	0.00
1. Oth e	er: Specify:		21.	+\$	0.00
0 V	(1. 1			•	0.000.00
		kpenses. Add lines 4 through 21.	22.	\$	2,890.00
	•	monthly expenses.			
		nonthly net income.	00-	c	2 222 22
		2 (your combined monthly income) from Schedule I.	23a.		2,892.03
23D.	. Copy your	monthly expenses from line 22 above.	23b.	-Ф	2,890.00
220	Subtract ve	our monthly expenses from your monthly income.			
23C.		is your <i>monthly net income</i> .	23c.	\$	2.03
	THE TESUIL	is your monding not moonto.	_00.		
4. Do v	you expect a	n increase or decrease in your expenses within the ye	ear after you file this	s form?	
For e	example, do yo	u expect to finish paying for your car loan within the year or do you			se or decrease because of a
modif	ification to the t	erms of your mortgage?			
■ N	No.				
\square Y	es.				
Expl	lain:				

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION CO				
	I declare under penalty of perjury th of 27 sheets, and that they are true and c				
Date	November 16, 2015	Signature	/s/ Simone Smith Simone Smith Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$11,011.00 2015 YTD: Estimated Employment Income
\$47,145.00 2014: Estimated Employment Income
\$42,505.00 2013: Estimated Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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B7 (Official Form 7) (04/13)

2

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
Partnership Conepts Realty Management, INC. v.
Simone Smith & Sedarius Smith
45D08-1511-SC-05670

NATURE OF PROCEEDING contract

COURT OR AGENCY AND LOCATION Super Ct. County Div. 2

STATUS OR DISPOSITION Pending

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

3

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

11. Closed financial accounts

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

GOVERNMENTE CIVIT

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND

NAME (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

3.T.A.3.4T

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b I

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 16, 2015

Signature /s/ Simone Smith
Simone Smith
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

	Northern District	of Hillions		
In re Simone Smith			Case No.	
	Debtor	(s)	Chapter	7
СНАРТЕ	CR 7 INDIVIDUAL DEBTOR'S	STATEMENT OF	'INTEN	ΓΙΟΝ
	operty of the estate. (Part A must b Attach additional pages if necessar		or EACH	I debt which is secured by
Property No. 1				
Creditor's Name: 1st Investers		eribe Property Secur 3 Saturn Vue with 119		
Property will be (check one):				
☐ Surrendered	■ Retained			
If retaining the property, I intend t ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain	o (check at least one): (for example, avoid lien	n using 11 U.S.C. § 5	22(f)).	
Property is (check one): ☐ Claimed as Exempt	■ N	ot claimed as exempt		
Attach additional pages if necessar	ct to unexpired leases. (All three columy.)	mns of Part B must be	completed	d for each unexpired lease.
Property No. 1				
Lessor's Name: Richard Jones	Describe Leased Property month to month residential	lease U.S	ase will be S.C. § 365(YES	Assumed pursuant to 11 (p)(2): □ NO
personal property subject to an u	-		ty of my	estate securing a debt and/or
Date November 16, 2015	Signature /s/ Sin	none Smith		

Simone Smith Debtor

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United States Bankruptcy Court Northern District of Illinois

In r	e Simone Smith			Case No.		
			Debtor(s)	Chapter	7	
	DISC	CLOSURE OF CO	MPENSATION OF ATTOR	NEY FOR DI	EBTOR(S)	
1.	compensation paid to a	me within one year before	Rule 2016(b), I certify that I am the attorest the filing of the petition in bankruptcy, caplation of or in connection with the bank	or agreed to be paid	to me, for services r	
	For legal services	, I have agreed to accept		\$	1,400.00	
	Prior to the filing	of this statement I have re	eceived	\$	0.00	
	Balance Due			\$	1,400.00	
2.	The source of the com	pensation paid to me was:	:			
	Debtor	☐ Other (specify):				
3.	The source of compen	sation to be paid to me is:				
	Debtor	☐ Other (specify):				
4.	■ I have not agreed t	to share the above-disclose	ed compensation with any other person u	nless they are mem	bers and associates of	of my law firm.
			compensation with a person or persons what the names of the people sharing in the c			law firm. A
5.	In return for the above	e-disclosed fee, I have agre	reed to render legal service for all aspects	of the bankruptcy	case, including:	
	b. Preparation and fili	ing of any petition, schedu he debtor at the meeting o	and rendering advice to the debtor in deter- ules, statement of affairs and plan which re- of creditors and confirmation hearing, and	may be required;		kruptcy;
6.	By agreement with the	debtor(s), the above-discl	closed fee does not include the following s	service:		
			CERTIFICATION			
this	I certify that the forego bankruptcy proceeding		ent of any agreement or arrangement for p	payment to me for re	epresentation of the o	debtor(s) in
Date	ed: November 16, 2	2015	/s/ Marcie Venturini			
			Marcie Venturini 62			
			THE SEMRAD LAW 20 S. Clark Street	V FIRM, LLC		
			28th Floor			
			Chicago, IL 60603 (312) 913 0625 Fa	ıx: (312) 913 063	1	
			rsemrad@semradla	` '	•	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Simone Smith Matter Number 458879-001 Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 11/16/2015

Client :

Client

Attorney

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Rankruntey Court

		Northern District of Illinois	11 0	
In re	Simone Smith		Case No.	
		Debtor(s)	Chapter	7
		OF NOTICE TO CONSUM (b) OF THE BANKRUPTO	`	S)
Code.	I (We), the debtor(s), affirm that I (we) have	Certification of Debtor received and read the attached not	tice, as required by	§ 342(b) of the Bankruptcy
Simon	e Smith	X /s/ Simone Smit	:h	November 16, 2015
Printed	d Name(s) of Debtor(s)	Signature of De	btor	Date
Case N	No. (if known)	X		
		Signature of Joi	nt Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Northern District of Illinois

In re	Simone Smith		Case No.		
		Debtor(s)	Chapter 7		
	VER	IFICATION OF CREDITOR N	MATRIX		
		Number o	f Creditors:	52	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	November 16, 2015	/s/ Simone Smith Simone Smith Signature of Debtor			

1st Invest**case 15-39011 Doc 1**380 Interstate North Parkway Attport Menims Page 50 of 51
Atlanta, GA 30339
Po Box 9400
Wilkes Barr, PA 18773
Page 50 of 51
Po Box 9400
Wilkes Barr, PA 18773
Wilkes Barr, PA 18773

Capital One Dept Of Ed/Navient Dept Of Ed/Navient Attn: Bankruptcy Attn: Claims Dept Attn: Claims Dept Po Box 30285 Po Box 9400 Po Box 9400 Salt Lake City, UT 84130 Wilkes Barr, PA 18773 Wilkes Barr, PA 18773

Comcast
1255 W. North Ave
Chicago, IL 60622-1562

Dept Of Ed/Navient
Attn: Claims Dept
Po Box 9400
Wilkes Barr, PA 18773

Dept Of Ed/Navient
Attn: Claims Dept
Po Box 9400
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ComEd

3 Lincoln Center

Attn: Claims Dept
Attn: Bankruptcy Section
Oakbrook Terrace, IL 60181

Dept Of Ed/Navient
Attn: Claims Dept
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Po Box 9400
Wilkes Barr, PA 18773

Wilkes Barr, PA 18773

Wilkes Barr, PA 18773

Commonwealth Financial SystemDept Of Ed/Navient
245 Main St
Dickson, PA 18519
Po Box 9400
Wilkes Barr, PA 18773
Dept Of Ed/Navient
Attn: Claims Dept
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Commonwealth Financial SystemDept Of Ed/Navient
245 Main St
Dickson, PA 18519
Po Box 9400
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Dept Of Ed/Navient
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Credtrs Coll

Po Box 63

Kankakee, IL 60901

Dept Of Ed/Navient

Attn: Claims Dept

Po Box 9400

Wilkes Barr, PA 18773

Dept Of Ed/Navient

Attn: Claims Dept

Po Box 9400

Wilkes Barr, PA 18773

Debt Recovery Solution Dept Of Ed/Navient ERC/Enhanced Recovery Co Attention: Bankruptcy Attn: Claims Dept 8014 Bayberry Rd Jacksonville, FL 32256 Westbury, NY 11590 Wilkes Barr, PA 18773

Dept Of Ed/Navient Dept Of Ed/Navient ERC/Enhanced Recovery Co Attn: Claims Dept Attn: Claims Dept 8014 Bayberry Rd Po Box 9400 Po Box 9400 Jacksonville, FL 32256 Wilkes Barr, PA 18773

Dept Of Ed/Navient Dept Of Ed/Navient Exeter Finance Corp Attn: Claims Dept Po Box 166097 Po Box 9400 Po Box 9400 Irving, TX 75016 Wilkes Barr, PA 18773

Fifth Third
Card Center
P O Box 740789
Cincinnati, OH 45274

Navient
Attn: Claims Dept
Po Box 9500
Wilkes-Barr, PA 18773

Wells Fargo Dealer Servi Po Box 3569 Rancho Cucamonga, CA 917

Hsbc/tax

Navient Hsbc Taxpayer Financial Servicettn: Claims Dept 90 Christiana Rd Po Box 9500 New Castle, DE 19720 Wilkes-Barr, PA 18773

Mcsi Inc
Po Box 327
Palos Heights, IL 60463
Navient
Attn: Claims Dept
Po Box 9500

Wilkes-Barr, PA 18773

Mcsi Inc Po Box 327

Po Box 327 P.O. Box 2020 Palos Heights, IL 60463 Aurora, IL 60507

Nicor

Monteray Financial Services Omega Healthcare Tech School 9.0. Box 2809 3575 Grand Ave # D Gurnee, IL 60031

Navient

Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Partnership Concepts Realty Managem 201 East Ogden Hinsdale, IL 60521

Navient

Attn: Claims Dept Po Box 9500

Wilkes-Barr, PA 18773

PLS 1006B 162nd Street South Holland, IL 60473

Navient Stacia L Yoon
Attn: Claims Dept 1000 East 80th Place
Po Box 9500 Suite 555 North Tower
Wilkes-Barr, PA 18773 Merrillville, IN 46410

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Attn: Claims Dept Po Box 9500

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